

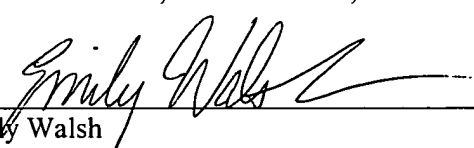
PATENT  
Attorney Docket No. ASC-043C2

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): Fitzgerald *et al.*  
SERIAL NO.: 10/625,018 GROUP NO.: 2812  
FILING DATE: July 23, 2003 EXAMINER: Not yet assigned  
TITLE: CMOS Inverter and Integrated Circuits Utilizing Strained Silicon  
Surface Channel MOSFETs

**CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8**

I hereby certify that this correspondence, and any document(s) referred to as enclosed herein, is/are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 23<sup>rd</sup> day of January, 2004.

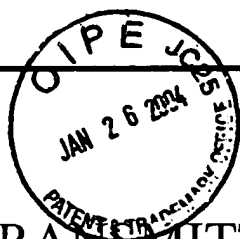
  
Emily Walsh

Commissioner for Patents  
P.O. Box 1450  
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Sir:

Submitted herewith are:

1. Transmittal Form (1 pg.);
2. Supplemental Information Disclosure Statement (2 pgs.);
3. Form PTO-1449 (1 pg.);
4. Copies of cited references B39-B41; and
5. Return Receipt Postcard.



# TRANSMITTAL FORM

Application Serial Number	10/625,018
Filing Date	July 23, 2003
First Named Inventor	Fitzgerald
Group Art Unit	2812
Examiner Name	Not yet assigned
Attorney Docket No.	ASC-043C2
Patent No.	Not applicable
Issue Date	Not applicable


## ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences
<input type="checkbox"/> Amendment/Response <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____]	<input type="checkbox"/> Formal Drawing(s)	<input type="checkbox"/> Appeal Brief (in triplicate)
<input type="checkbox"/> Petition for Extension of Time	<input type="checkbox"/> Request For Continued Examination (RCE) Transmittal	<input type="checkbox"/> Status Inquiry
<input checked="" type="checkbox"/> Supplemental Information Disclosure Statement <input checked="" type="checkbox"/> Form PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations (B39-B41)	<input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)	<input checked="" type="checkbox"/> Return Receipt Postcard
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	<input type="checkbox"/> Small Entity Statement	<input type="checkbox"/> Additional Enclosure(s) (please identify below)
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